

Bramley Health Limited

Heron View Care Home

Inspection report

6-10 Outram Road
Croydon
Surrey
CR0 6XE

Tel: 02086568983

Website: www.bramleyhealth.co.uk

Date of inspection visit:
28 March 2023

Date of publication:
26 April 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Heron View Care Home is a care home providing personal and nursing care to up to 35 people. The service provides support to people with mental health needs, neurocognitive conditions and acquired brain injury. At the time of our inspection there were 35 people using the service.

People's experience of using this service and what we found

People were safe at the service. Staff knew how to safeguard people from abuse and how to report safeguarding concerns to the appropriate agencies. Staff were provided appropriate training to help them reduce safety risks to people. They demonstrated good understanding of risks to people's safety and wellbeing and the action they should take to help keep people safe.

The service was clean and hygienic. Staff followed current infection control and hygiene practice to reduce the risk of infection. People's relatives and friends were free to visit without any unnecessary restrictions.

Regular health and safety checks of the premises and equipment were undertaken to make sure these were safe. Medicines were managed safely. People were supported to take their medicines as prescribed.

There were enough staff to support people and meet their needs. The provider carried out recruitment and criminal records checks to make sure staff were suitable to support people. Staff were well supported by managers and encouraged to improve their working practice when required.

People were satisfied with the care and support they received from staff. People's views were sought about how the service could improve and the provider acted on these.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

There was no registered manager in post at the time of this inspection. However, a new home manager had been appointed for the service. The home manager was suitably experienced, understood how people's needs should be met and had good oversight of the service.

There were systems in place to monitor and review the safety and quality of the service. Accidents and incidents were fully investigated and learning from these was shared with staff to help them improve the quality and safety of the support provided.

The provider worked proactively with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was good (published 29 July 2019).

Why we inspected

We received concerns in relation to the safety and quality of the care and support provided to people. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good, based on the findings of this inspection. We found no evidence during this inspection that people were at risk of harm from the concerns we received.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Heron View Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

Two inspectors and an Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Heron View Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Heron View Care Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. However, a new home manager was appointed in December 2022, who had submitted their registered manager application to CQC.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people using the service, 2 relatives and one healthcare professional. We asked them for their feedback about the service. We observed interactions between people and staff to understand people's experiences. We also spoke with the home manager, the clinical operations manager, 2 registered nurses and 1 support worker. We reviewed a range of records. This included 6 people's care records, medicines administration records (MARs), 3 staff recruitment files and other records relating to the management of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection, the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe at the service. People's feedback confirmed this. One person told us, "Yes, I feel safe... here is good."
- People appeared comfortable with each other and with staff. People were supported to interact safely with others, without fear of discrimination. For example, one person was able to discuss and express their sexuality freely and was comfortable doing so.
- The provider displayed information for people about how to report their concerns about abuse. They used pictures to describe situations that would amount to abuse to help people easily understand these and to recognise these were not acceptable and should be reported.
- Staff received relevant training to help them safeguard people from abuse. They knew what signs to look for that may indicate abuse and how and when to report concerns to the appropriate person or authority.
- The home manager understood their responsibility to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider undertook assessments of people's capacity to make and consent to decisions about specific aspects of their care and support. Where people lacked capacity to make specific decisions about their care and support the provider involved people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were regularly reviewed to check that they were still appropriate.

Assessing risk, safety monitoring and management

- Staff supported people to stay safe at the service. People's records contained detailed information about identified risks to their safety and wellbeing and the measures staff should take to manage these risks and keep people safe.
- Where people presented with behavioural support needs, these were assessed by healthcare professionals and staff followed their guidance. For example, people's care records noted the specific methods to be used to deescalate situations including redirection and the technique to be used to keep people safe if the situation continued to escalate. A healthcare professional told us on a recent visit they had observed a staff member's kindness towards a person who had become anxious and saw the staff member had approached them "very calmly...providing [the person] quickly with reassurance which managed the situation rapidly."
- Staff were trained to intervene physically to keep people safe in line with people's risk assessments, care plans and current practice. They understood risks to people and gave us examples of the action they took to support people to stay safe.
- Any restrictions of people's freedom had been documented, monitored, and triggered a review of the person's support plan.
- Staff took part in post incident reviews and considered what could be done to avoid the need for the use of physical intervention in similar circumstances.
- Senior staff undertook regular health and safety checks of the premises and dealt with any issues arising from these. Safety systems and equipment used at the service were maintained and serviced at regular intervals to make sure these remained in good order and safe for use.
- Staff had received training to deal with emergency situations if these should arise at the service.

Staffing and recruitment

- There were enough staff to support people. Staff were present and provided appropriate support and assistance to people when this was needed.
- The provider operated safe recruitment practices. They conducted appropriate checks on staff that applied to work at the service to make sure they were suitable to support people. This included checks with the Disclosure and Barring Service (DBS) who provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines safely and as prescribed.
- People's records contained information about their medicines and how staff should support them to take them in a timely and appropriate way.
- Our checks of medicines stocks, balances and records showed people consistently received the medicines prescribed to them. Medicines were stored safely and appropriately.
- The provider audited medicines stock and records and checked staff's competency to make sure they were managing and administering medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.

- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- The provider made sure visiting arrangements at this service were in line with government guidance.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Staff understood when and how to report and record accidents and incidents to managers.
- The home manager investigated accidents and incidents and made sure action was taken to reduce the risk of these reoccurring.
- The home manager analysed accidents and incidents at the service on a monthly basis to check for any trends or themes. They shared learning with staff from accidents and incidents to help them improve the quality and safety of the support provided.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection, the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The home manager promoted a culture at the service that valued people, protected their rights, and supported them to achieve positive outcomes in relation to their care and support needs. The home manager used audits and checks of the service to make sure staff were delivering care and support to this expected standard, and took appropriate action when shortfalls were identified.
- The home manager was available and accessible to people and staff. They were kind and respectful and took a genuine interest in what people and staff had to say.
- Staff were supported and valued which supported a positive and improvement-driven culture. Staff could raise concerns without fear of what might happen as a result.
- People's feedback and views about the service were sought by the provider. This was used to plan how the service could be improved for them. For example, based on recent feedback from people, activities had been planned based on people's preferences for these. A relative told us, "Staff will ask your opinion and ask if they can get better."
- Staff were provided opportunities through individual supervision and team meetings to give their feedback about how the service could be improved and help people achieve positive outcomes.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care

- There was no registered manager in post at the time of this inspection. The current home manager was appointed in December 2022 and had submitted their registered manager application to CQC.
- The home manager had the skills, knowledge, and experience to perform their role, a clear understanding of people's needs and good oversight of the service. They used governance systems to monitor and review the safety and quality of the service which helped to ensure people were safe and receiving high quality care and support.
- Issues identified through checks were acted on promptly including supporting and encouraging staff to learn and improve their working practices.
- The provider undertook their own checks and reviews of the service at regular intervals to make sure the service was meeting required standards. This included oversight and challenge in the use of restrictions at the service to make sure these were lawful, in the person's best interest, and used in a safe and proportionate way.
- The home manager had a clear vision for how the service needed to improve and had plans in place for

making the required changes.

- Staff had clearly defined roles, responsibilities, and duties. Staff worked well together and were focused on meeting people's needs and helping them to achieve positive outcomes in relation to their care and support. A healthcare professional told us, "They were able to provide me detailed feedback about [person's] care to date, medication compliance and expressed interest in understanding how to work with [the person] and their history...it felt they were all working well together."
- People's feedback indicated they were satisfied with the care and support provided by staff. One person said, "I like it here." Another person told us, "I like it here. I'm quite happy." A relative said about staff, "They're all very nice, very caring."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; working in partnership with others

- The provider had systems in place to investigate accidents, incidents, and complaints and to make sure people would be involved and informed of the outcome.
- The home manager understood and demonstrated compliance with regulatory and legislative requirements.
- The home manager gave honest information and suitable support and applied duty of candour where appropriate.
- The provider worked in partnership with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and help them achieve positive outcomes. A healthcare professional told us, "I was impressed on my visit that the staff seemed to have a good understanding of [person's] needs after just a couple of days. . .they were kind, observant and professional towards [person], providing useful feedback to the new care team and myself."